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Bib Data Sheet

CONFIRMATION NO. 2713

SERIAL NUMBER 10/780,794	FILING OR 371(c) DATE 02/18/2004 RULE	CLASS 600	GROUP ART UNIT 3766	ATTORNEY DOCKET NO. 279.A90US2
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APPLICANTS

Yinghong Yu, Maplewood, MN;
 Jiang Ding, Maplewood, MN;
 Julio Spinelli, Shoreview, MN;
 Angelo Auricchio, Magdeburg, GERMANY;

**** CONTINUING DATA *******

This application is a DIV of 09/822,790 03/30/2001 PAT 6,766,189

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

** 05/11/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MN	SHEETS DRAWING 11	TOTAL CLAIMS 50	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>Mark D. Smith</i>	Initials <i>MB</i>		

ADDRESS

21186

TITLE

Method and apparatus for predicting acute response to cardiac resynchronization therapy

FILING FEE RECEIVED 1396	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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